



STATE OF WASHINGTON
WASHINGTON STATE BOARD OF HEALTH
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November 10, 2004

TO: Washington State Board of Health Members

FROM: Tom Locke, Board Chair

**RE: HEARING ON PROVISIONALLY NOTIFIABLE CONDITIONS,
CHAPTER 246-101 WAC**

Summary

The State Department of Health (DOH) presented a report and recommendations regarding eight provisionally notifiable conditions to the State Board of Health in March 2004 (see attached report). The Board filed a [CR-101 \(WSR 04-12-119\)](#) on June 2, 2004 announcing it was considering, based on the DOH report and comments from interested parties, changes to WAC 246-101-015, 101-101, 101-201, and 101-301. In addition, DOH filed an emergency rule (<http://slc.leg.wa.gov/wsr/2004/16/04-16-099.htm>) to add "arboviral disease" to the list of notifiable conditions and remove "encephalitis, viral" from the list on August 4, 2004; this emergency rule expires in December 2004.

Board staff and DOH personnel collaborated to draft proposed rule language regarding the status of these provisionally notifiable conditions and the Board filed a [CR-102 \(WSR 04-20-067\)](#) with the Office of the Code Reviser on October 4, 2004. Under the proposed language, seven of the provisionally notifiable conditions would be added to the permanent list (group A streptococcus being the one exception), and the emergency rule on arboviral disease would also become permanent. The language would also extend the hepatitis C reporting requirement to laboratories. Today the Board will hold a formal public hearing on the proposed changes and consider adoption.

I have invited Jennifer Tebaldi from DOH to review the proposed rule changes. Ms. Tebaldi will also report on the public comments received regarding the proposed changes.

Recommended Board Action

I recommend that the Board consider, amend if necessary, and adopt the following motion.

The Board adopts the revised Chapter 246-101 as published in WSR 04-20-067.

Background

In 2000, the Board adopted changes to Chapter 246-101 WAC that made autism, cerebral palsy, fetal alcohol syndrome/fetal alcohol effects, hepatitis B (chronic), hepatitis C, herpes simplex (initial genital infection), group A streptococcus (invasive disease only), and birth defects-abdominal wall defects provisionally notifiable through August 2004. In March 2004, DOH prepared a report per the specifications outlined in WAC 246-101-015 and recommended that the Board make all of the conditions except group A streptococcus permanently notifiable. The proposed rule makes autism, cerebral palsy, fetal alcohol syndrome/fetal alcohol effects, hepatitis B (chronic), hepatitis C, herpes simplex (initial genital infection), and birth defects-abdominal wall defects permanently notifiable and removes group A streptococcus from the list of reportable conditions.

In addition, as provisionally notifiable conditions, hepatitis B and hepatitis C reporting was required only of providers and facilities. Reporting by laboratories is presently voluntary but not mandated. Based on a

recommendation from interested parties, the proposed rule requires laboratories to report hepatitis B and hepatitis C to public health authorities.

Arboviral disease became a reportable condition in August 2004 via an emergency rule enacted by the Department of Health. The emergency rule will expire on December 2, 2004. The proposed rule makes arboviral disease permanently reportable and removes encephalitis, viral from the list of reportable conditions.

Additionally, the proposed rule includes the following changes to update terminology. Birth Defects-Autism will be updated to Birth Defects—Autism Spectrum Disorders and the term Birth Defects—Fetal Alcohol Syndrome/Fetal Alcohol Effects will be listed as Birth Defects—Alcohol Related Birth Defects.

Attachment